FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

APPROVED
AND
FILED

97 JUL -1 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000046186

1. Corporation Name
VENTO SOFTWARE, INC.

Principal Place of Business
1525 NW 167TH STREET
SUITE #115
MIAMI, FLORIDA 33169

Mailing Address
SAME

3. Date Incorporated or Qualified: 06/16/1994
3a. Date of Last Report:

2. Principal Place of Business
21 1525 NW 167TH STREET
22 Suite, Apt. #, etc. SUITE #115
23 City & State MIAMI, FLORIDA
24 Zip 33169 25 Country U.S.A.

2a. Mailing Address
26 1525 NW 167TH STREET
27 Suite, Apt. #, etc. SUITE #115
28 City & State MIAMI, FLORIDA
29 Zip 33169 30 Country U.S.A.

4. FEI Number: 65-0504690 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MARBIN, EVAN R
48 E. Flagler St.
Penthouse 104
Miami, FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
Sharon Gonzales gave authorization by

83 phone to add Evan Marbin as

84 City registered agent. SM 7/1/97 FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	11 TITLE	P/D ☐ Change ☒ Addition
NAME	GOMES, JOHN	12 NAME	BLYER, DAVID
STREET ADDRESS	1525 NW 167TH STREET SUITE#115	13 STREET ADDRESS	1525 NW 167TH STREET, SUITE #115
CITY-ST-ZIP	MIAMI, FLORIDA 33169	14 CITY-ST-ZIP	MIAMI, FLORIDA 33169
TITLE	☐ DELETE	21 TITLE	D/V/S/T ☒ Change ☐ Addition
NAME		22 NAME	GOMES, JOHN
STREET ADDRESS		23 STREET ADDRESS	1525 NW 167TH STREET, SUITE #115
CITY-ST-ZIP		24 CITY-ST-ZIP	MIAMI, FLORIDA 33169
TITLE	☐ DELETE	31 TITLE	400010222304--1 ☐ Change ☐ Addition
NAME		32 NAME	-07/02/97--01040--024
STREET ADDRESS		33 STREET ADDRESS	****165.00 ****165.00
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	SM 7/1/97
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DAVID BLYER 6/23/97 (305)625-5554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)